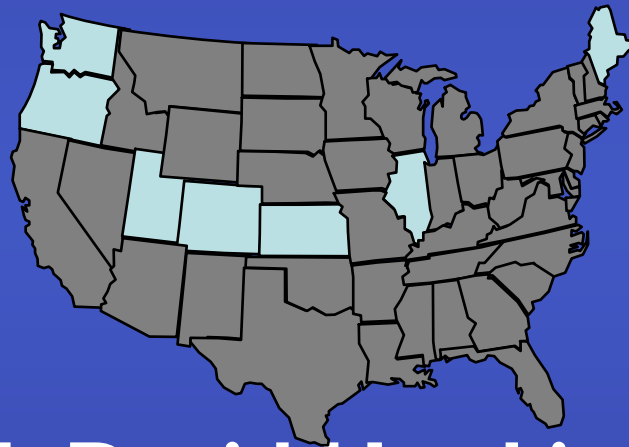




Community Youth Development Study: A Test of Communities That Care Progress Report



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The Communities That Care Operating System

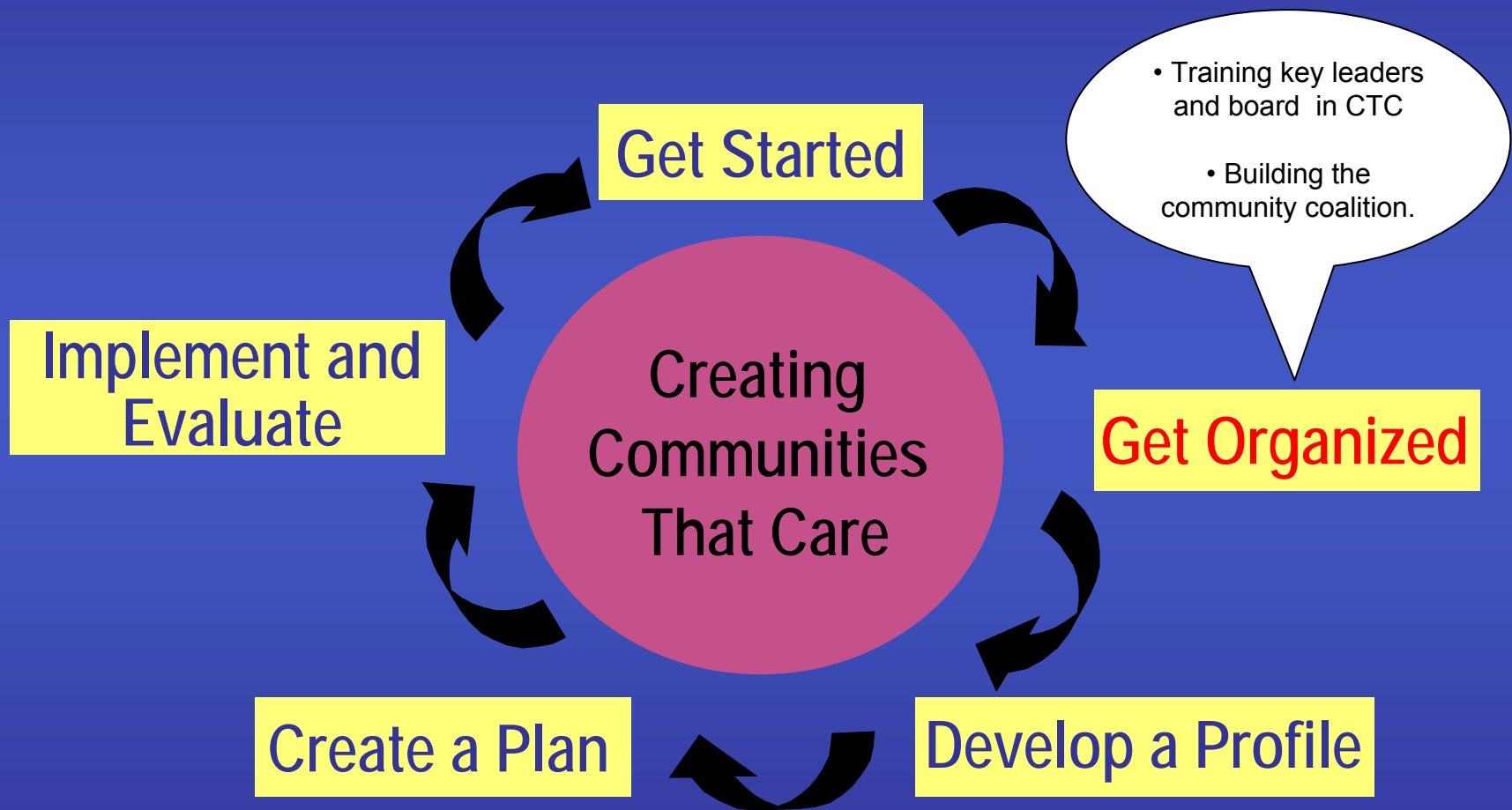




The Communities That Care Operating System



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The Communities That Care Operating System





The Communities That Care Operating System



The Communities That Care Operating System

- Form task forces.
- Identify and train implementers.
- Sustain collaborative relationships.
- Evaluate processes and outcomes.
- Adjust programming.

Implement and Evaluate

Get Started

Get Organized

Create a Plan

Develop a Profile





What is required to install CTC?

- A coalition of community stakeholders.
- A coordinator for the CTC process.
- Manuals and curriculum materials.
- Training from certified trainers.
- Technical assistance when difficulties are encountered.
- A monitoring system to provide routine feedback on progress and outcomes.



CTC Trainings

1. Key Leader Orientation
2. Community Board Training
3. Community Assessment Training
4. Community Resource Assessment Training
5. Community Planning Training
6. Community Program Implementation Training



Communities that Care Process and Timeline

Process

Measurable Outcomes

Assess risk,
protection and
resources

Implement and
evaluate
tested
prevention
strategies

Increase in
priority
protective
factors

Decrease in
priority risk
factors

Increase in
positive youth
development

Reduction in
problem
behaviors

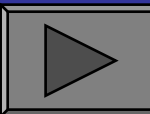
Vision for a
healthy
community

6-9 mos.

1 year

2-5 years

5-10 years



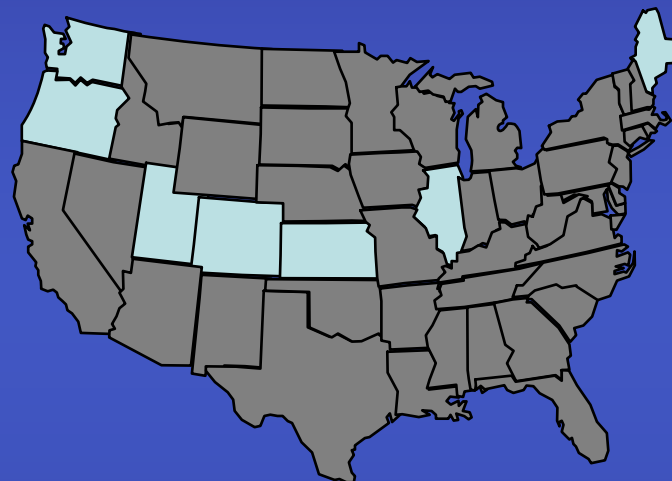


The Community Youth Development Study (CYDS)

- A 24 community randomized controlled trial to test the Communities That Care system started in 2003.



The Community Youth Development Study



Funded by:

National Institute on Drug Abuse

Center for Substance Abuse Prevention

National Cancer Institute

National Institute on Child Health and Development

National Institute on Mental Health

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CYDS Primary Aim

- To test the effects of the Communities That Care system in**
- reducing levels of risk**
 - increasing levels of protection**
 - reducing health and behavior problems among adolescents**
- using a true experimental design.**



Background



- **The Diffusion Project (1997-2002)** found that in 13 community pairs, neither community was using prevention science to guide its prevention efforts.
- **12 sets of these paired communities agreed to be randomly assigned to CTC or control condition in 2003.**



Demographics of 24 CYDS Communities

	Mean	Minimum	Maximum
Total Population	14,616	1,578	40,787
Percent Caucasian	89.4%	64.0%	98.2%
Percent Hispanic Origin	9.6%	0.5%	64.7%
Percent African-American	2.6%	0.0%	21.4%
Percent Eligible for Free/Reduced Lunch	36.5%	20.6%	65.9%

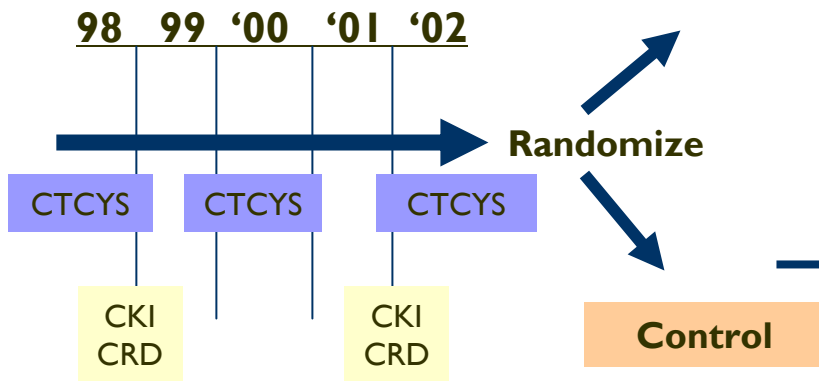


STUDY DESIGN

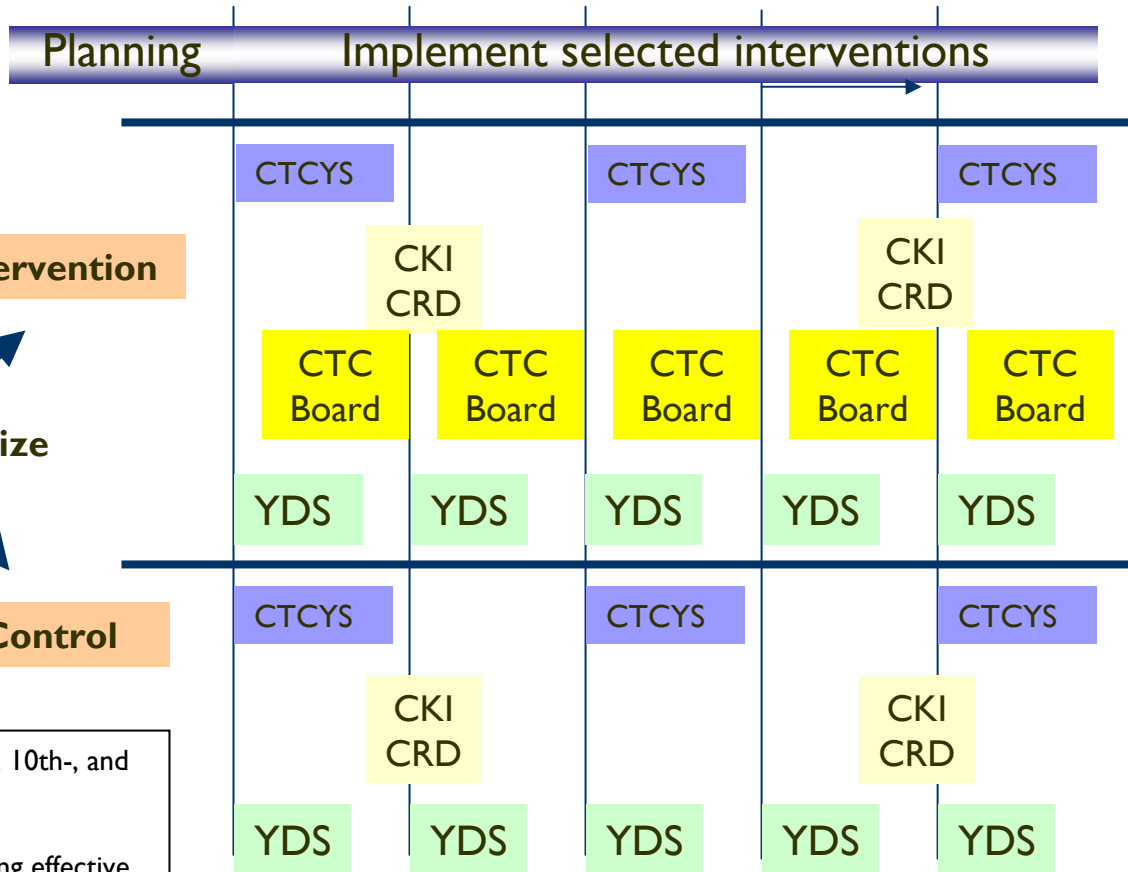


Randomized Controlled Trial 2003-2008

5-Year Baseline 1997-2002



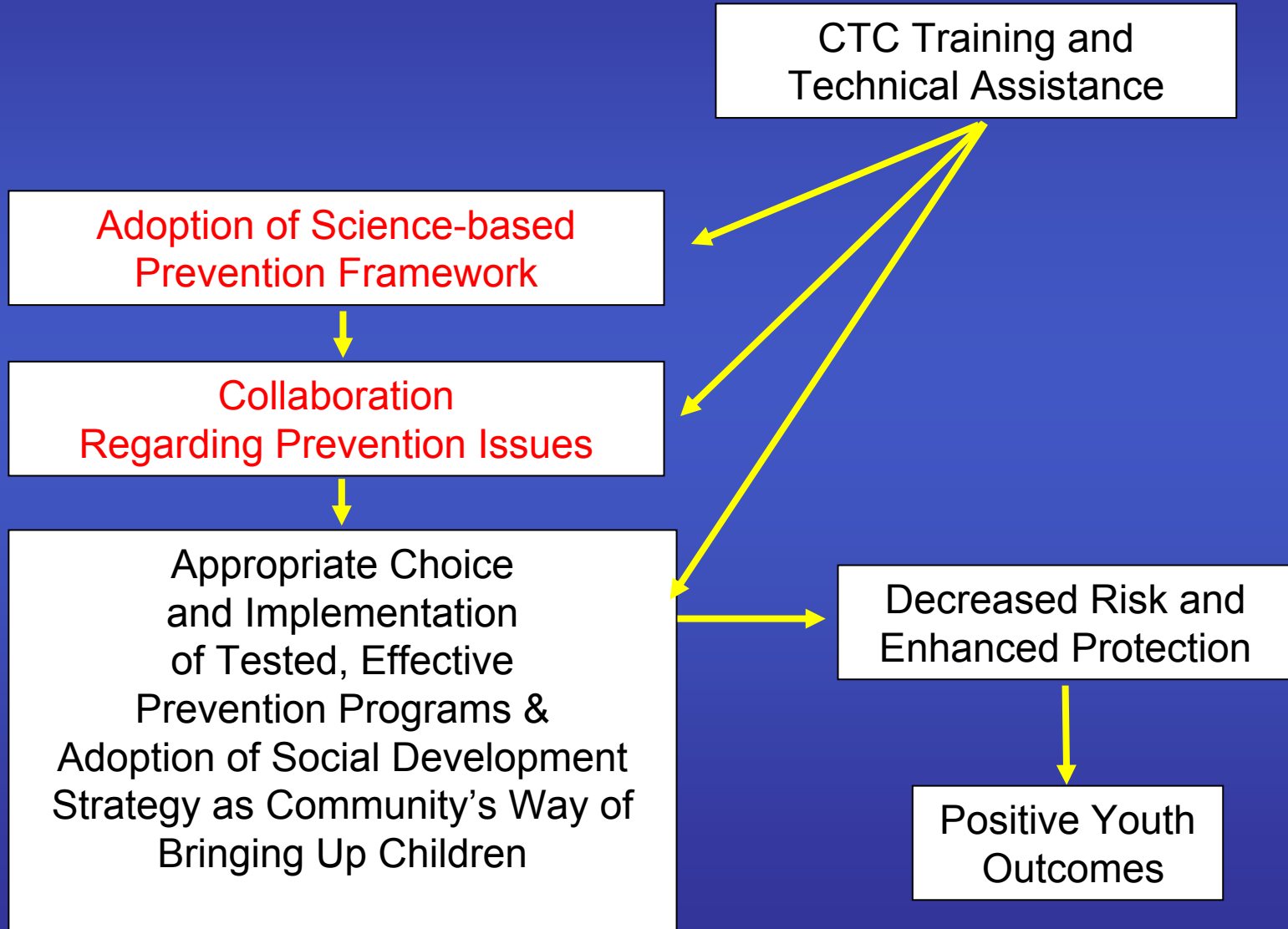
2003 2004 2005 2006 2007 2008



CTCYS: Cross-sectional student survey of 6th-, 8th-, 10th-, and 12th-grade students using the CTC Youth Survey
CKI: Community Key Informant Interview
CRD: Community Resource Documentation measuring effective prevention programs and policies in the community
CTC Board: CTC Board Member Interview
YDS: Longitudinal Youth Development Survey of students in the class of 2011 starting in 5th grade in spring 2004



Communities That Care Theory of Change





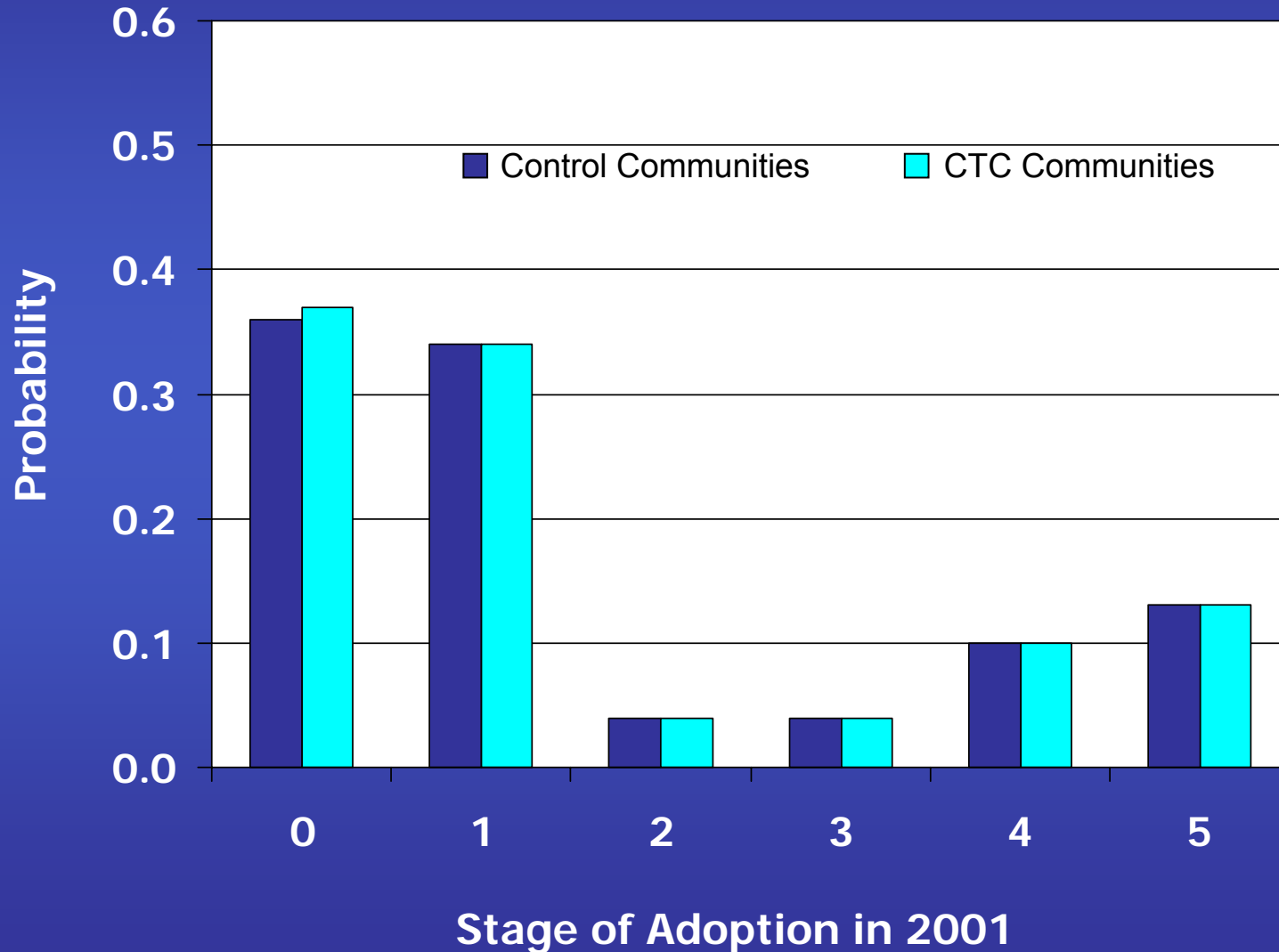
Stages of Adoption of Science-Based Prevention



- Stage 0: No Awareness
- Stage 1: Awareness of Prevention Science Terms and Concepts
- Stage 2: Using Risk and Protection Focused Prevention Approach as a Planning Strategy.
- Stage 3: Incorporation of Community Epidemiological Data on Risk and Protection in Prevention System.
- Stage 4: Selection and Use of Tested and Effective Preventive Interventions to Address Prioritized Risk and Protective Factors.
- Stage 5: Collection and Feedback of Process and Outcome Data and Adjustment of Preventive Interventions Based on Data.

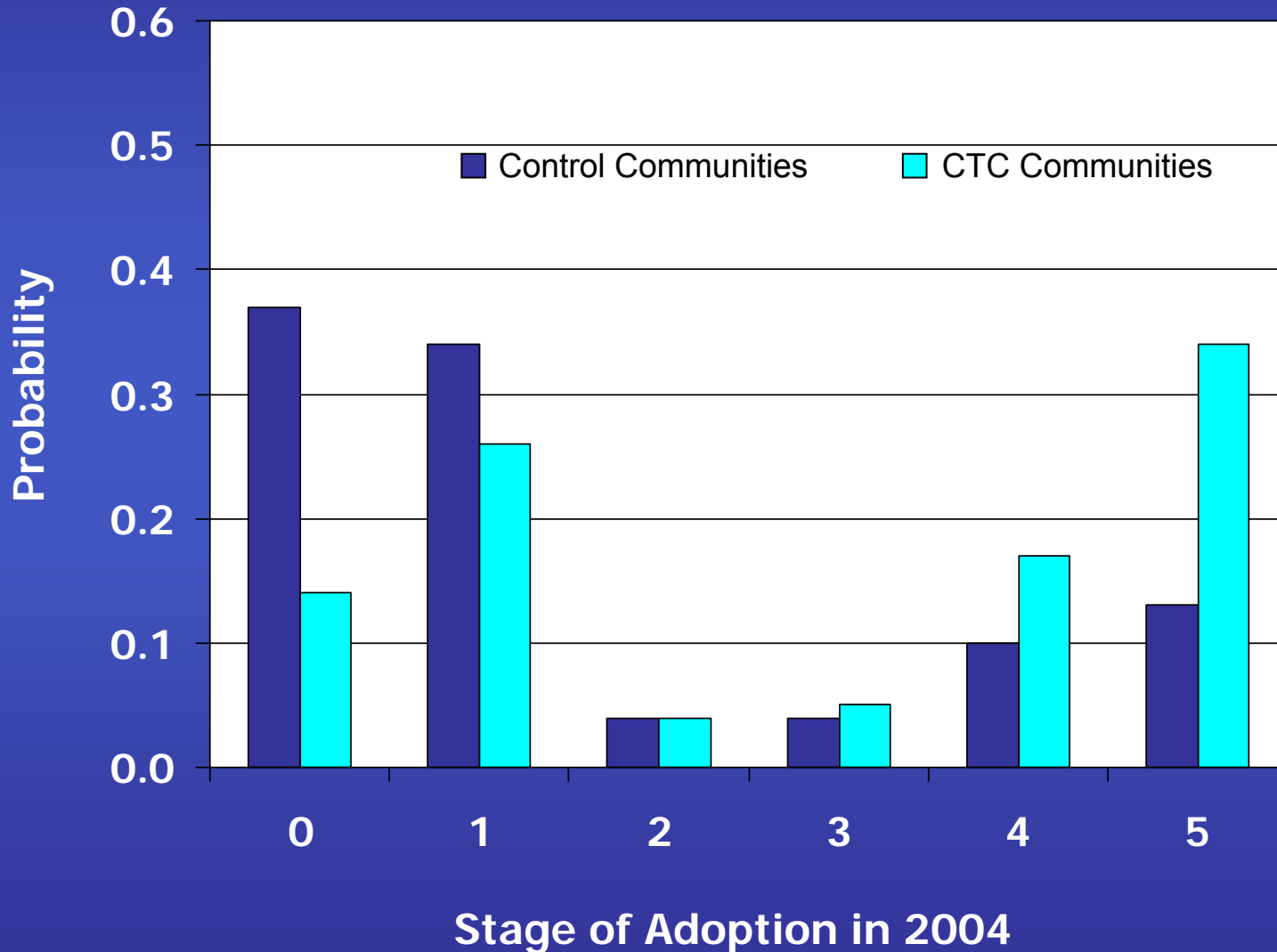


Baseline Stages of Adoption by Community Intervention Status





Post-Intervention Stages of Adoption by Community Intervention Status



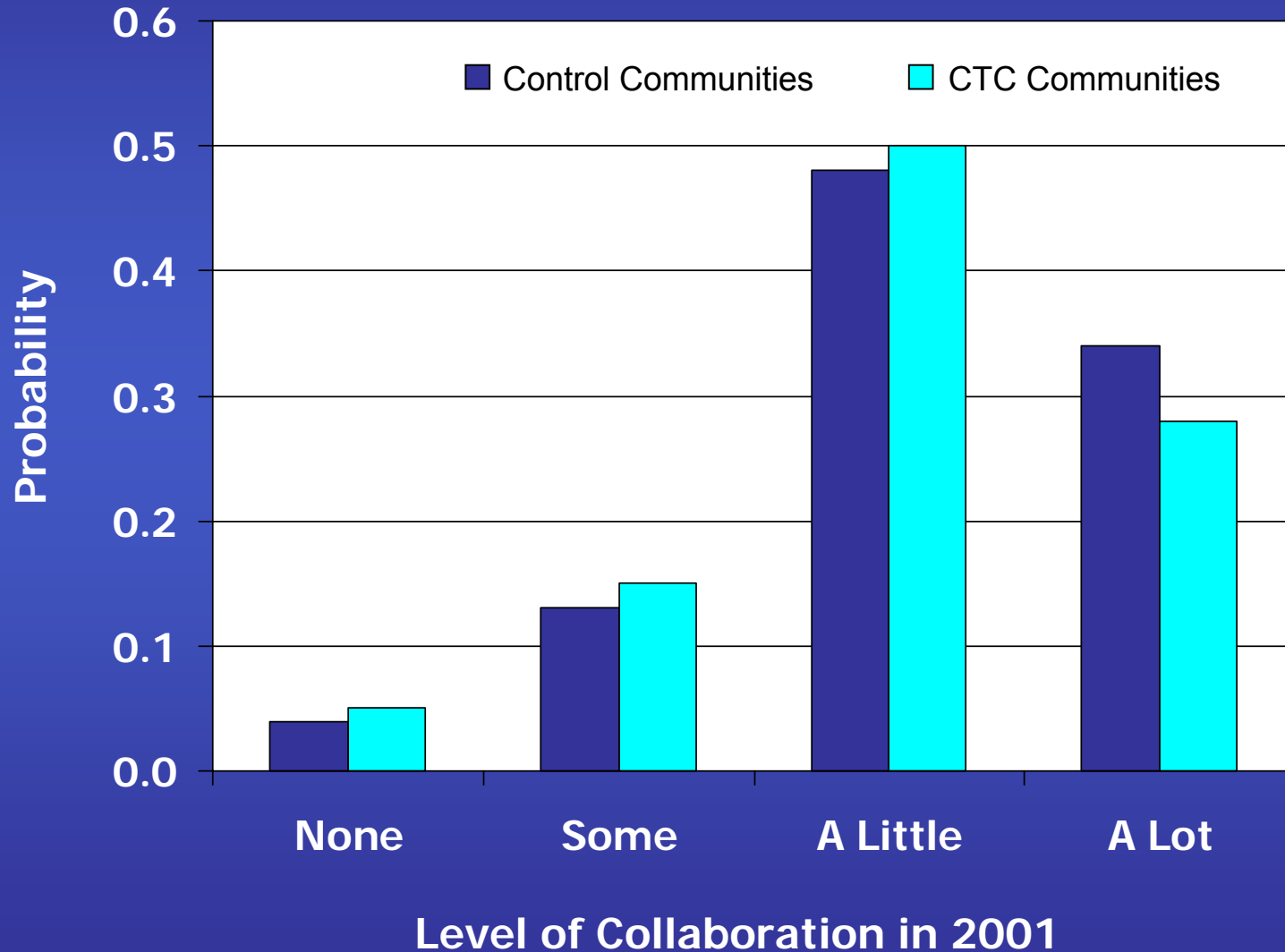


Prevention Collaboration

- Assessed by degree to which key leaders report collaborating with a local coalition.
 - Assessed by prevention collaboration scale of 9 items.
 - Examples:
 - There is a network of people concerned about prevention issues who stay in touch with each other.
 - Organizations in [COMMUNITY] share money or personnel when addressing prevention issues.
 - Organizations in [COMMUNITY] participate in joint planning and decision making about prevention issues.
- 1=strongly agree, 2=somewhat agree, 3=somewhat disagree, 4=strongly disagree*

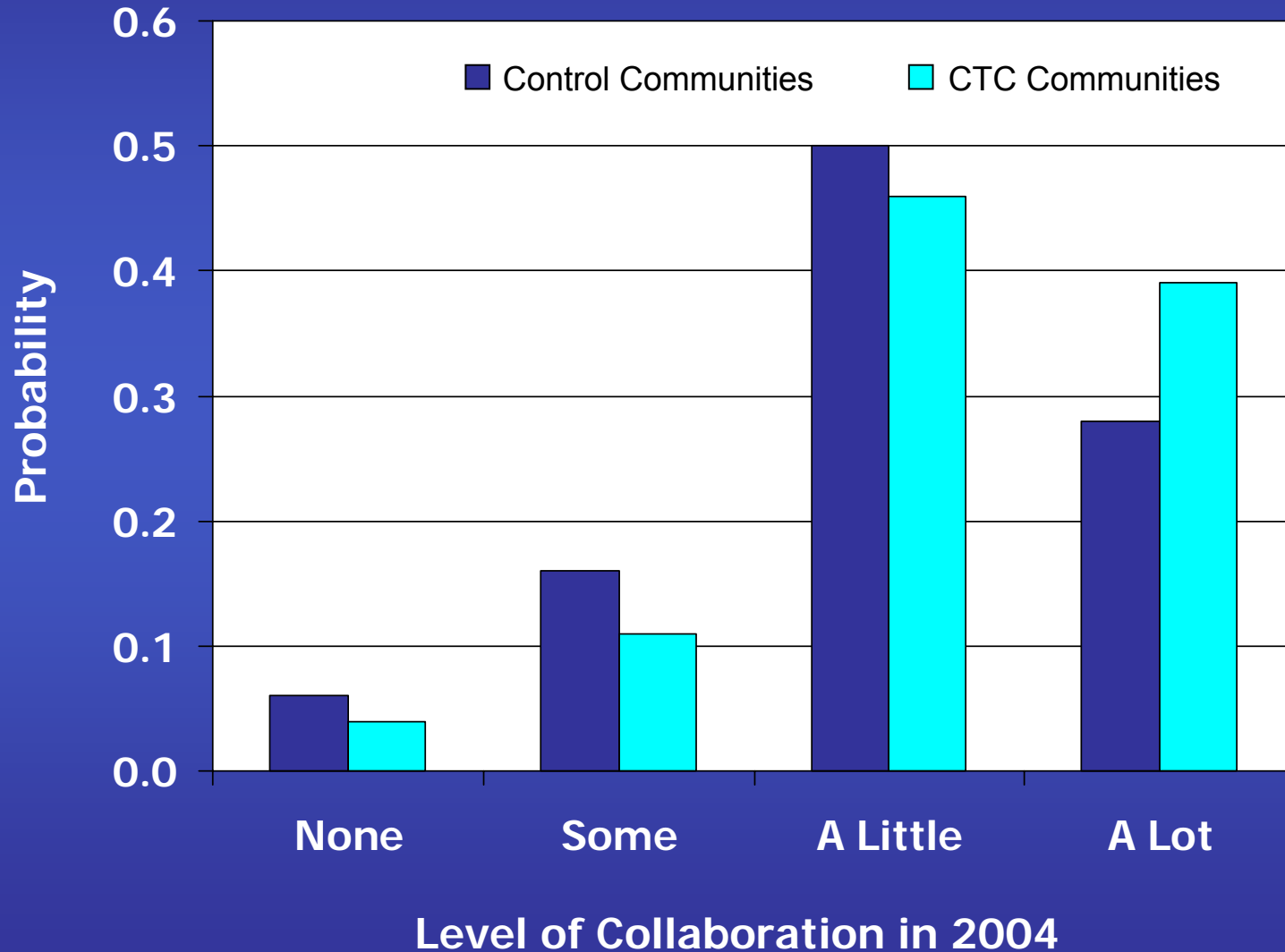


Baseline Levels of Collaboration With Community Coalitions by Community Intervention Status

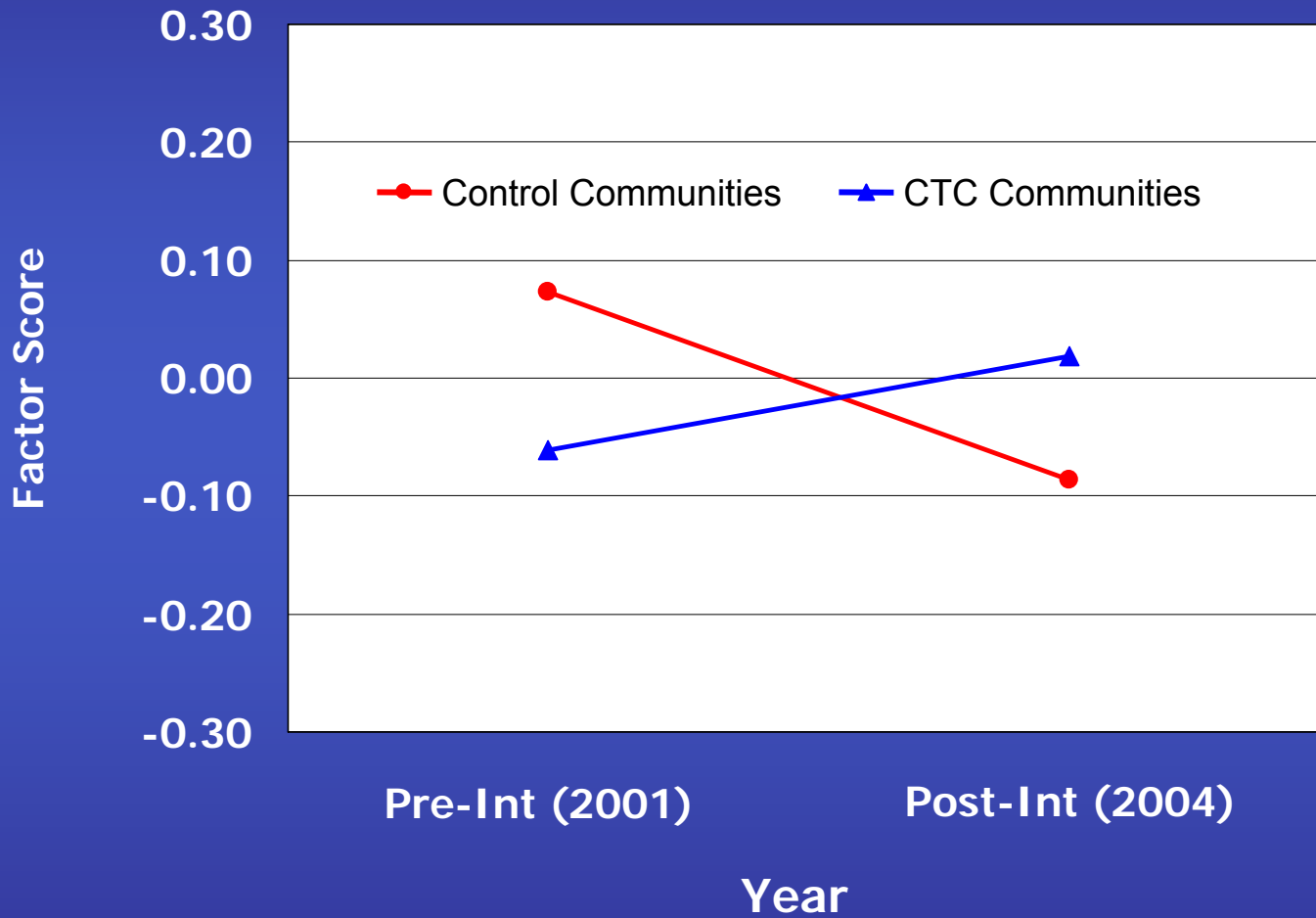




Post-Intervention Levels of Collaboration With Community Coalitions by Community Intervention Status

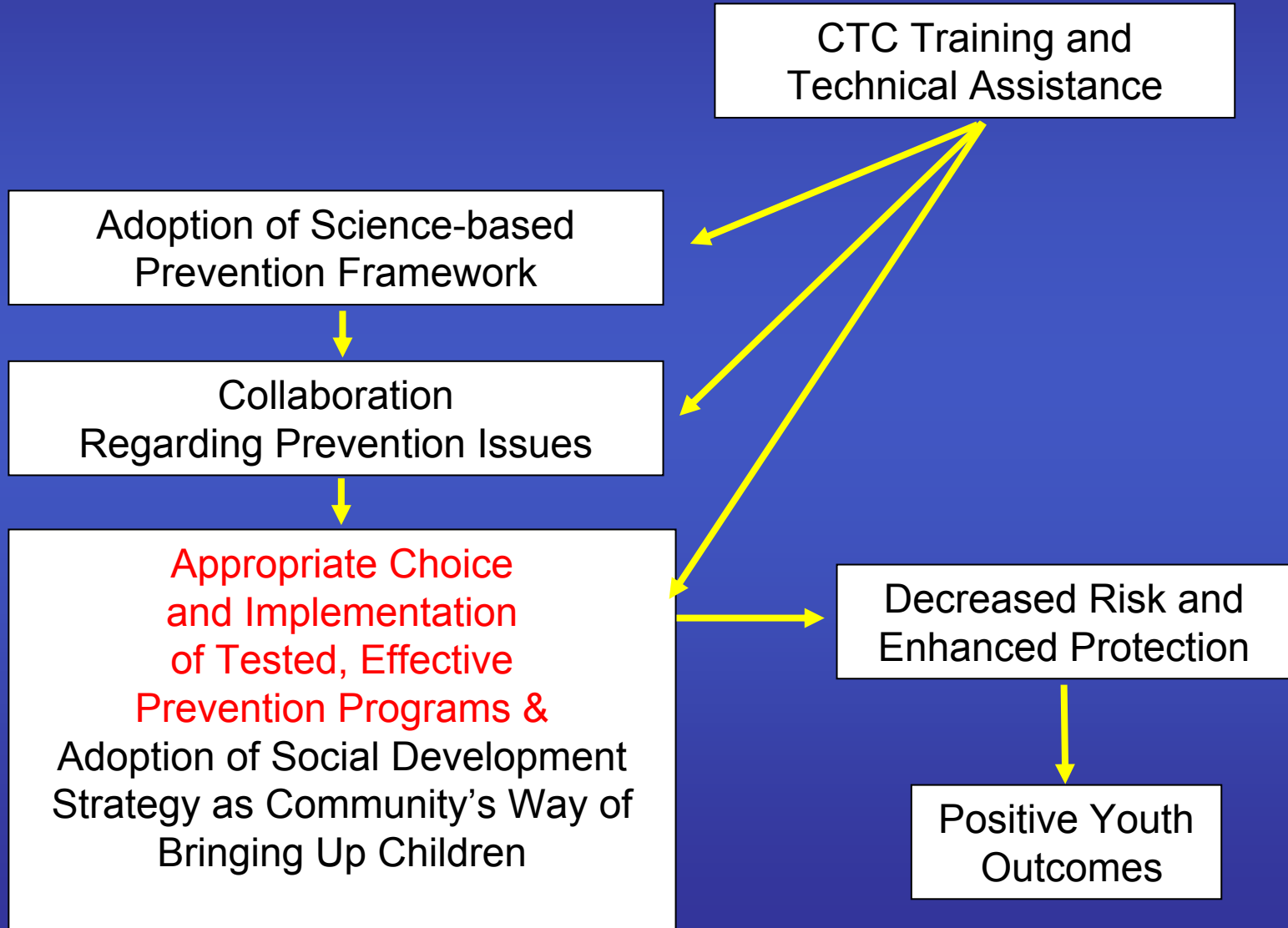


Change in Prevention Collaboration by Community Intervention Status





Communities That Care Theory of Change





Program Choice

CTC Community Board members selected prevention programs from a menu of programs* that:

- ~ Showed significant effects on risk/protective factors, drug use, delinquency, or violence
- ~ Involved at least one high-quality research study
- ~ Targeted children or families in grades 5-9
- ~ Provided materials and training



Programs Selected in 2004-2007



<u>PROGRAM</u>	<u>2004-05</u>	<u>2005-06</u>	<u>2006-07</u>
All Stars Core	1	1	1
Life Skills Training	2	4*	5*
Lion's-Quest Skills for Adolescence	2	3	3
Project Alert	-	1	1
Olweus Bullying Prevention Program	-	2*	2*
Program Development Evaluation Training	1	1	-
Participate and Learn Skills (PALS)	1	1	1
Big Brothers/Big Sisters	2	2	2
Stay SMART	3	3	1
Tutoring	4	6	6
Valued Youth Tutoring Program	1	1	1
Strengthening Families 10-14	2	3	3
Guiding Good Choices	6	7*	8*
Parents Who Care	1	1	-
Family Matters	1	1	2
Parenting Wisely	-	1	1
TOTAL	27	38	37

*Program funded through local resources in one or two communities



Exposure in the Community

Program Type	2004-05	2005-06	Fall 2006
School Curricula	1432	3886	4675
After-school*	546	612	340
Parent Training	517	665	229

*Includes PALS, BBBS, Stay SMART, and Tutoring programs



Participant Attendance

Percent attending >60% of the total number of sessions

Program Type	2004-05	2005-06	Fall 2006
School Curricula	96%	91%	85%
After-school*	77%	81%	73%
Parent Training	79%	78%	78%

*Includes PALS, BBBS, Stay SMART, and Tutoring programs

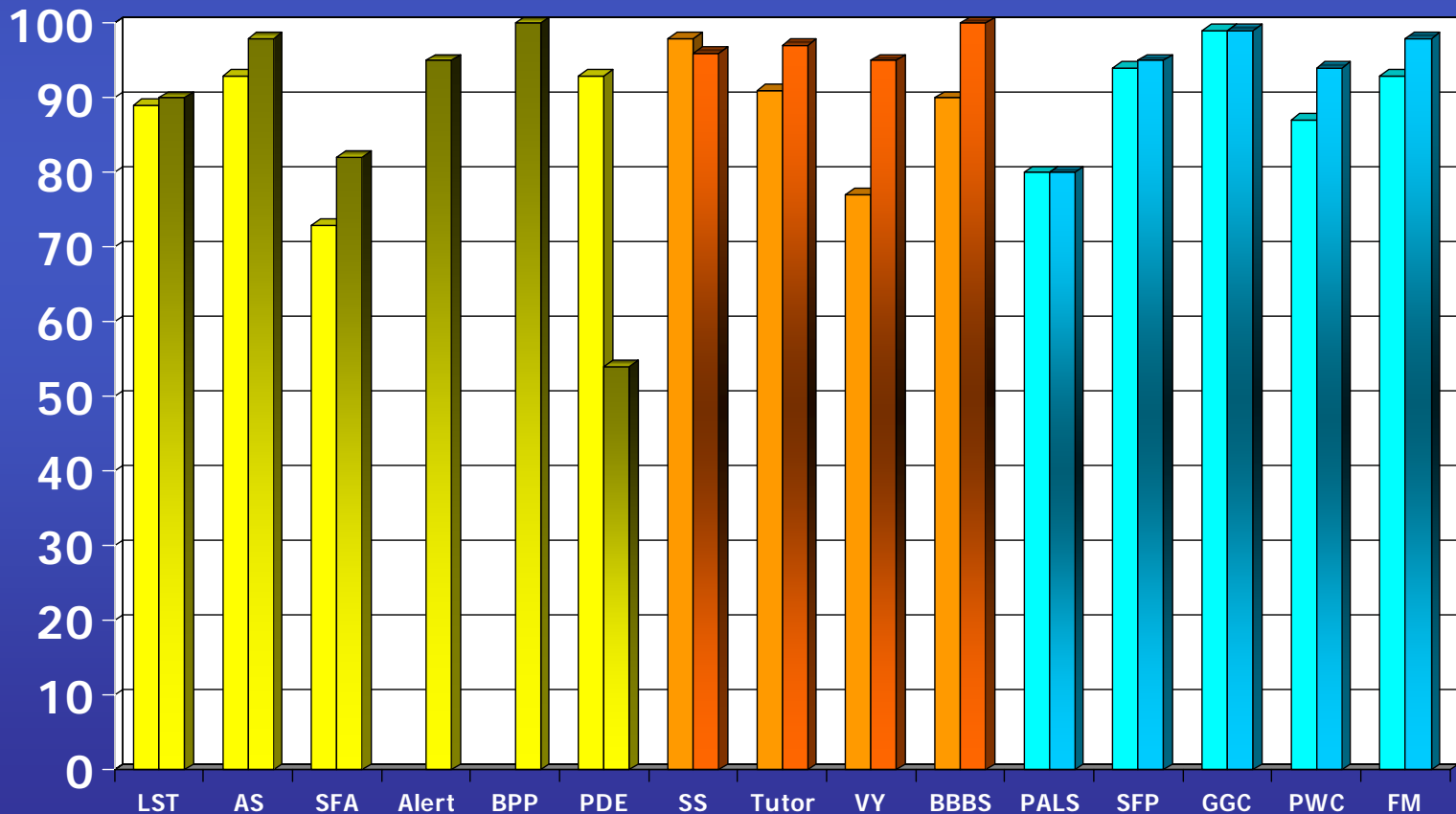


Adherence Rates



2004-05 and 2005-06 school years

Percentage of material taught or core components achieved



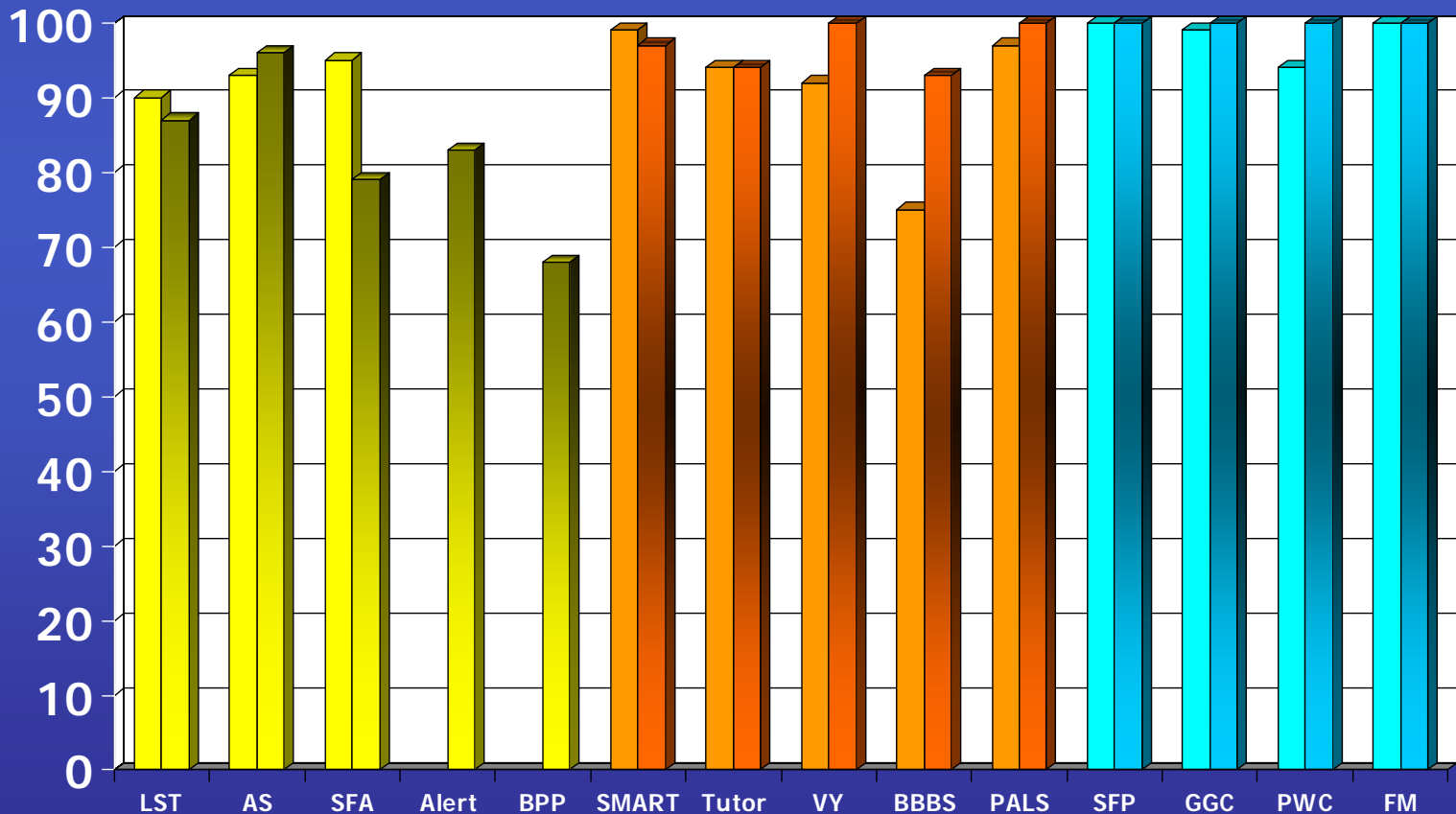


Delivery of Lessons

2004-05 and 2005-06 school years

(number, length, and frequency of required sessions)

Percentage of delivery requirements met



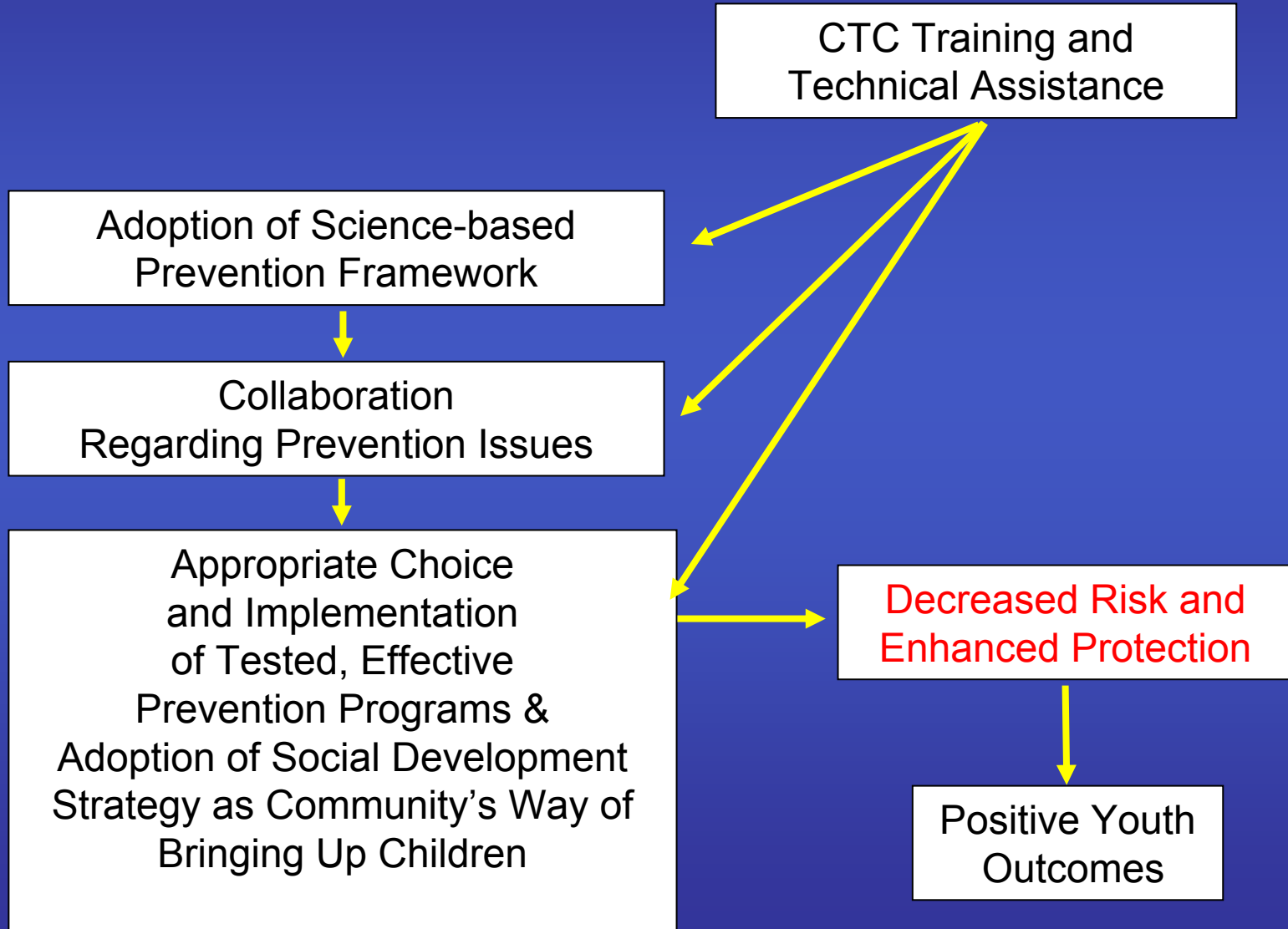


Progress

- **Collaboration is higher in CTC communities than in control communities.**
- **CTC communities and schools are adopting tested & effective programs.**
- **The new programs are being implemented with fidelity.**



Communities That Care Theory of Change





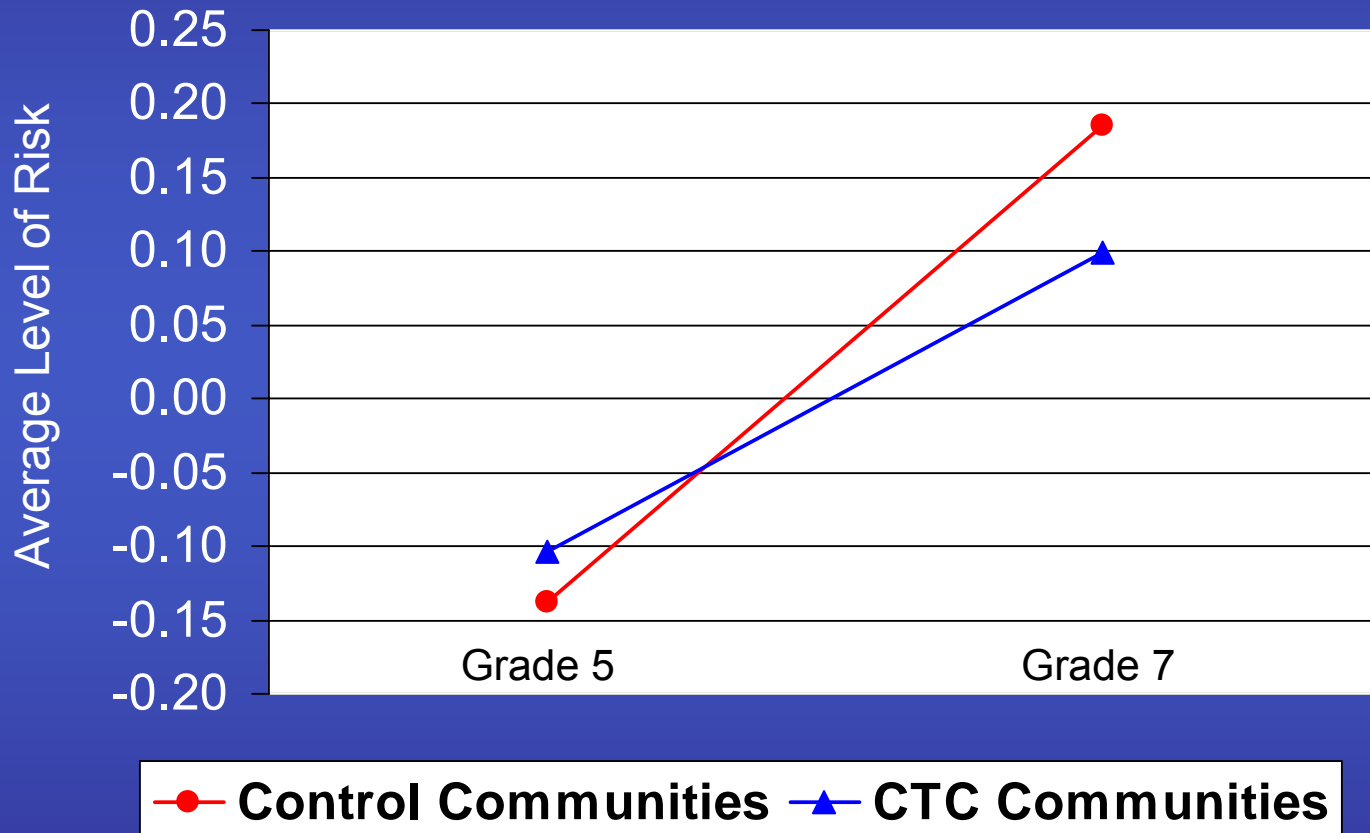
Prioritized Risk Factors in CTC Communities

- **Family management problems**
- **Parental attitudes favorable to problem behavior**
- **Family conflict**
- **Low commitment to school**
- **Favorable attitudes toward problem behavior**
- **Friends who engage in problem behavior**
- **Academic failure**
- **Rebelliousness**
- **Laws and norms favorable toward drug and alcohol use**

Risk factors that have been identified by 2 or more communities



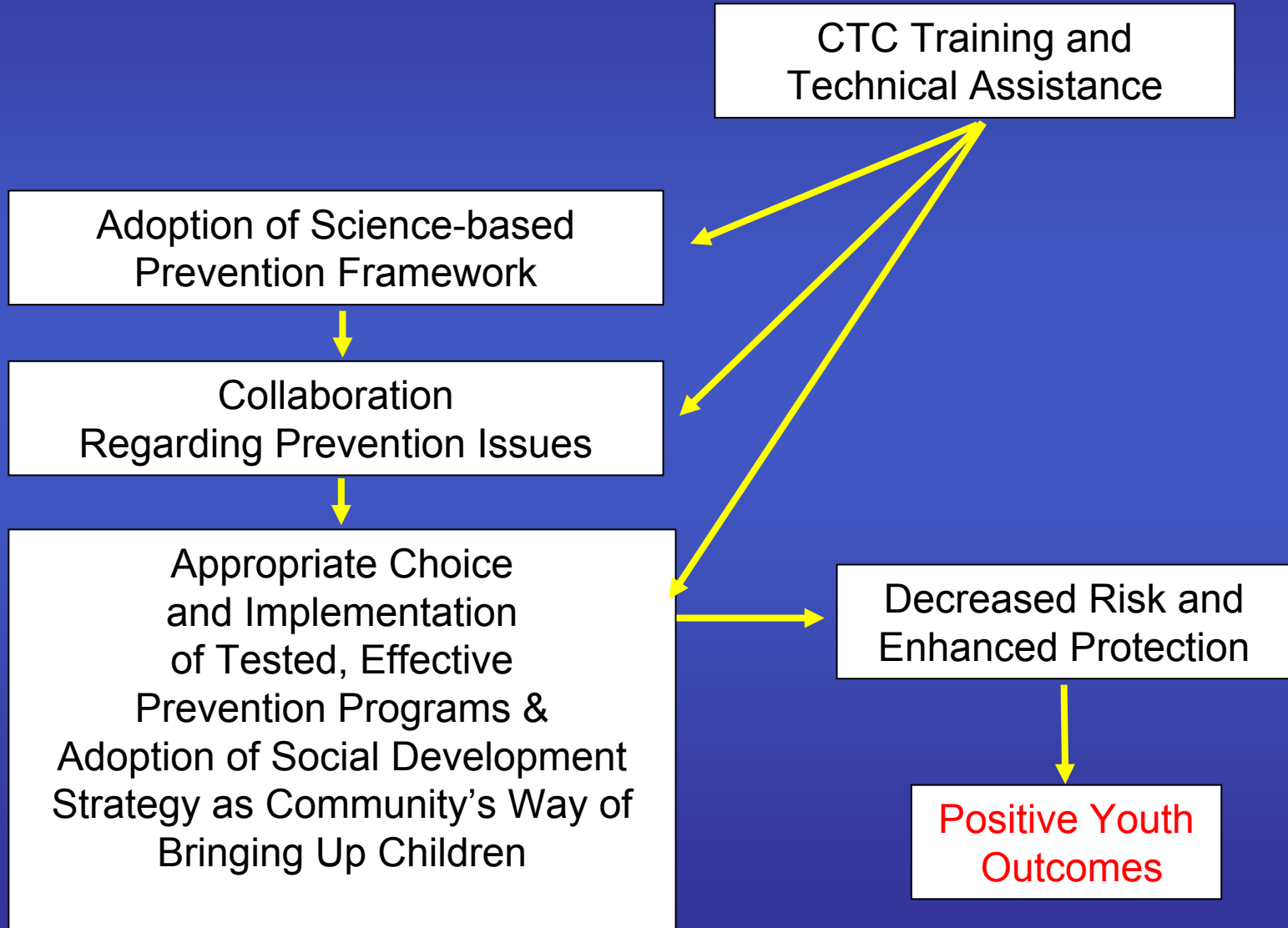
Pre-post change in risk factors prioritized and targeted in CTC Communities



Note. Values are model-fitted levels of standardized average risk for students in the Youth Developmental Study panel sample. Nonsignificant difference in means at Grade 5, $t(11) = 0.61, p > .05$. Significant difference in means at Grade 7, $t(11) = -3.13, p = .01$.



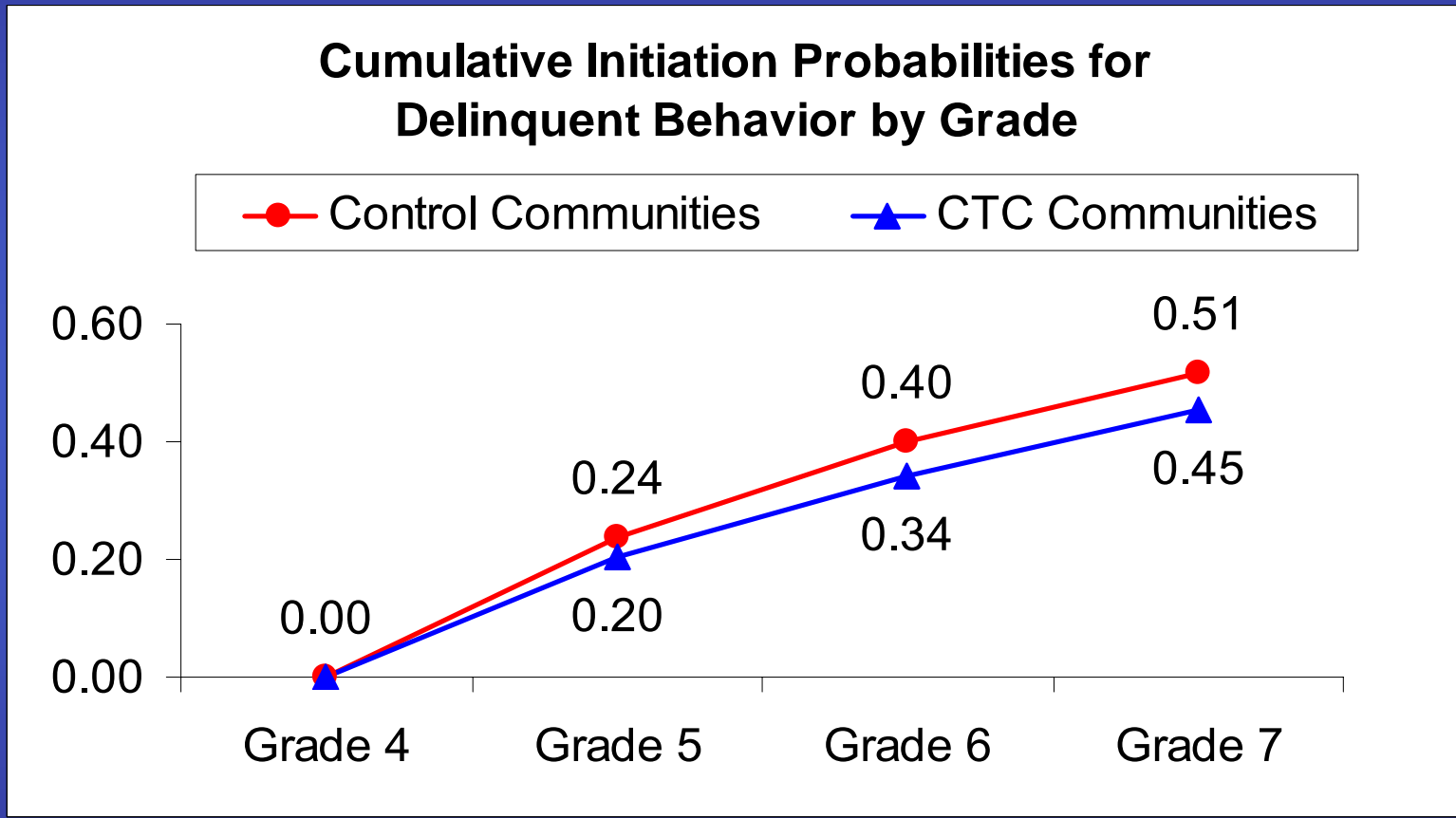
Communities That Care Theory of Change



Delinquency Items

How many times in the past year (12 months) have you...	5th Grade	6th Grade	7th Grade
stolen something worth more than \$5?	√	√	√
purposely damaged or destroyed property that did not belong to you (not counting family property)?	√	√	√
taken something from a store without paying for it?	√	√	√
attacked someone with the idea of seriously hurting them?	√	√	√
been arrested?	×	√	√
beat up someone so badly that they probably needed to see a doctor or a nurse?	×	√	√
sold illegal drugs?	×	×	√
stolen or tried to steal a motor vehicle such as a car or motorcycle?	×	×	√
taken a handgun to school?	×	×	√

Delayed Onset of Delinquent Behavior



Note. Youth Developmental Study panel.

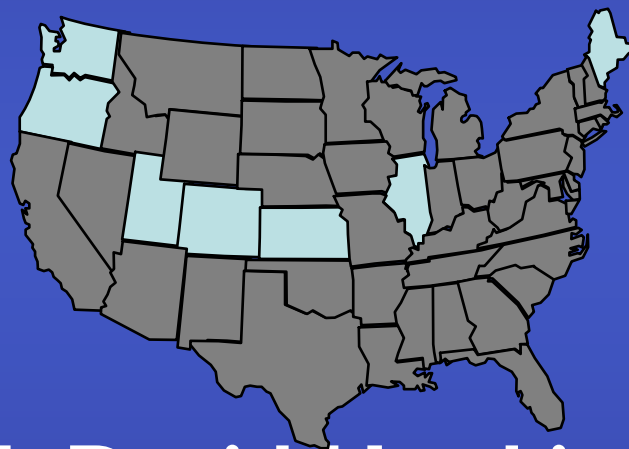


Progress

- **Targeted Risk Factors are increasing less rapidly in CTC than in control communities.**
- **The rate of initiation of delinquent behavior is lower in CTC than in control communities.**



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